

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report	<input type="checkbox"/> Amends report filed on
		MM / DD / YYYY 09 / 02 / 2016	

Full Name of Payee Campaign Graphics		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 01 / 2016	
Mailing Address 1229 N. Wakonda Street		Amount 441.89	
City Flagstaff	State AZ	Zip Code 86004	Transaction ID : SE.6314
Purpose of Expenditure Lapel stickers and shirts for canvassers NC		Category/ Type 006	Date of Disbursement or Obligation MM / DD / YYYY 09 / 01 / 2016
Name of Federal Candidate CLINTON, HILLARY RODHAM, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		119302.08	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Campaign Graphics		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 01 / 2016	
Mailing Address 1229 N. Wakonda Street		Amount 441.89	
City Flagstaff	State AZ	Zip Code 86004	Transaction ID : SE.6316
Purpose of Expenditure Lapel stickers and shirts for canvassers NC		Category/ Type 006	Date of Disbursement or Obligation MM / DD / YYYY 09 / 01 / 2016
Name of Federal Candidate ROSS, DEBORAH K, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		97927.08	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	883.78
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Buchanan, Emily, , ,

[Electronically Filed]

Date

 MM / DD / YYYY
 09 / 02 / 2016

Signature